



DEBIT / ATM CARD APPLICATION

To apply for a Security State Bank of Aitkin **MasterCard** Debit Card you must have a Security State Bank checking account and/or savings account. Each applicant must complete a separate application. All purchases made with the MasterCard Debit Card will be deducted from your primary checking account.

Cardholder Name: _____

SSN/EIN#: _____ Home Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Business Phone: _____

Cell Phone: _____ Employer: _____

Mother's Maiden Name: _____ Date of Birth: _____

Email Address: _____

Do you currently have a Security State Bank MasterCard Debit Card?

I wish to access this account for Debit Card purchases and ATM use: ☐ Yes ☐ No

Primary Checking Account # _____

Savings Account (Optional)# _____

By signing below, I am applying for a Security State Bank of Aitkin MasterCard Debit Card. I understand this is not a credit card and that the dollar amount of the purchases made with this card will be deducted from my primary Security State Bank of Aitkin checking account. I authorize Security State Bank of Aitkin to verify the information provided above and to request a credit report if necessary. The Security State Bank of Aitkin Debit Card is available for qualified customers only. I agree to be bound by the terms and conditions covered in the MasterCard Disclosure Statement and Cardholder Agreement.

Applicant's Signature

X _____

Date: _____

FOR BANK USE ONLY

Card # (do not print the full acct.#):

Date Approved:

Date Ordered:

By:

ID Type:

Approved By:

Verified:

ID #:

If address changed within 30 days of Application Date, customer identity must be verified in person and photo identification documented.